

Volenski, Dina

022819 Emma |

From: Cantelme. Steve <cantelmes@sacoes.org>
Sent: Thursday, February 28, 2019 8:54 AM
To: Will, Gina
Cc: Cantelme. Steve
Subject: City of Folsom Reimbursement Request doc for Town of Paradise Camp Fire 2018
Attachments: Lauren Ono 3871.pdf; Paradise EOC ICS 214 - L Ono.pdf; Cost Summary Work Sheet - L Ono.pdf

Hi Gina,

I have attached the reimbursement documents provided to me from the City of Folsom for the Camp Fire. Division Chief Ken Cusano is the Folsom point of contact if you have questions or needs from them.

I have not received an executed MOU from the Town of Paradise to date. Can you confirm that you received my signed copies and do you have a timeline in which you think you will be getting an executed MOU to me? Please let me know if you need anything more from me.

Thanks

Stephen Cantelme
Chief
Sacramento OES
(916) 806-6596
cantelmes@sacoes.org


Folsom POC:

Ken Cusano
Division Chief – Training / Investigations

Fire Department
535 Glenn Drive, Folsom, CA 95630
O: 916.461-6313 | C: 916.716.7412
F: 916.984.7081

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EMMA

Incident: 2018-10-08 Camp Fire

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EMMA Form 1A - EMMA RESOURCE REQUEST

TO BE COMPLETED BY REQUESTING JURISDICTION

Submit completed and signed form to next SEMS level EMMA Coordinator. A corresponding RIMS Mission Request must also be submitted in order for this request to be processed. If RIMS access is not available, the appropriate EMMA Coordinator may create the RIMS Mission Request on the requestor's behalf.

Request #: 3871

Incident Name: Camp Fire

Request Date / Time: 11/18/2018 09:05:42

Approved Mission / Tracking
#:

Requesting Jurisdiction Information

Requesting Jurisdiction Name: Town of Paradise
24 Hours Phone Number: 530-879-2340
EMMA Coordinator / Primary Point of Contact: John Gulserian
Position / Title: Logs Phone: 530-879-2340 Alt Phone: 530-913-0191
Fax: E-Mail:
Alternate Point of Contact: Kate Anderson
Position / Title: Logs Chief Phone: 530-879-2340 Alt Phone:
Fax: E-Mail:

Resource Requested

Position: FILLED - PIO
Quantity: 2
Start Date/Time: 11/21/2018 09:13:31
End Date/Time: 11/28/2018 09:13:36
Shift: Day
Security Clearance: No
Tasks to be performed:
Any special skills / certifications / licenses / credentials required? No
EMMA resource needs to bring the following equipment (Laptop, vehicle, personal protective equipment, etc.):
Laptop, vehicle Base Camp lodging

Check-in Location Information

Check-in Location Address: 905 Fir Street Chico CA - Chico Fire Training Center
Latitude / Longitude: /
24 Hour Phone Number: 530-879-2340
Point of Contact Name: John Gulserian
Point of Contact Title: Logs
Cell Phone: 530-913-0191
Alt Phone:
E-Mail: eoclogisticstop@gmail.com

Expected Working Conditions

Special health or environmental concerns in the assignment area?
Hardship living conditions (Lack of power or potable water, etc.)?
Special housing / transportation instructions: Cal OES Base Camp - Bring sleeping bag

Providing Jurisdiction Information

[Edit Response](#)

Providing Jurisdiction Name: Sacramento
24 Hour Phone Number:
EMMA Coordinator / PRIMARY Point of Contact: Matthew Hawkins
Name:
Position / Title: Sacramento - OP AREA - LOG Personnel Phone: 916-293-2769 Alt Phone:
Fax: E-Mail: hawkinsm@sacoes.org
Alternate Point of Contact (Optional):
Position / Title: Phone: Alt Phone:
Fax: E-Mail:

EMMA Resource Candidate

<input checked="" type="checkbox"/> This Candidate has been Accepted.	
Name:	Lauren Ono
E-Mail:	lono@folsom.ca.us
Able to perform requested tasks?	Yes
Equipment needed for deployment is available?	Yes
Experience / EOC Position	Deputy Fire Marshall / PIO
Credentials:	Social Media / Press Releases
Special Skills / Certifications / Licenses:	Folsom, CA
Originating Location (City and County):	2 hour
Estimated travel time to check-in location:	
Special accommodations required:	
Emergency Contact Name:	
Relationship:	
Additional Comments	Available for the duration of the request.
	Cell Phone:
	Alt Phone:
	Cell:
	Available for the period specified in the corresponding EMMA Form 1A?
	Security Clearance (If applicable)?
	Has been made aware of the expected working conditions?

Unit Log

Paradise EOC ICS 214

Incident Name: Camp Fire - Paradise EOC		Date/Time Prepared: 11/21	Page ____ of ____
Operational Period: 12	Op Period: From: Date: 11/21	Time: 0600 To: Date:	Time: 0600
Unit Name/Designator: PUBLIC INFORMATION	Unit Leader (Name & Position): JAKE BARNES		

[illegible]

Prepared by: Lauren ONO	Agency Name: Folsom Fire	EOC Position: PIO
Town of Paradise EOC ICS 214 Department		

Unit Log

Paradise EOC ICS 214

Incident Name: Camp Fire - Paradise EOC		Date/Time Prepared: 11/22	Page ____ of ____
Operational Period: 13	Op Period: From: Date: 11/22 Time: 0600 To: Date: Time: 0600		
Unit Name/Designator: PIO	Unit Leader (Name & Position): JAKE BANLESS		

TIME

Activity / Events

[illegible]

Prepared by: <u>Lauren AND</u>	Agency Name: <u>Folsom FD</u>	EOC Position: <u>AD</u>
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Unit Log

Paradise EOC ICS 214

Incident Name: Camp Fire - Paradise EOC		Date/Time Prepared: 11/23	Page ____ of ____
Operational Period: 14	Op Period: From: Date: 11/23 Time: 0600 To: Date: Time: 0600		
Unit Name/Designator: P10	Unit Leader (Name & Position): Jake Banless		

TIME

Activity / Events

[illegible]

Prepared by: Lauren ORO	Agency Name: Folsom PD	EOC Position: PIO
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Unit Log

Paradise EOC ICS 214

Incident Name: Camp Fire - Paradise EOC		Date/Time Prepared: 11/24	Page ____ of ____
Operational Period: 15	Op Period: From: Date: 11/24 Time: 0600 To: Date: Time: 0600		
Unit Name/Designator: PLO	Unit Leader (Name & Position): Jake Banks		

[illegible]

Prepared by: Lauren Ono	Agency Name: Folsom PD	EOC Position: PIO
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Unit Log

Paradise EOC ICS 214

Incident Name: Camp Fire - Paradise EOC		Date/Time Prepared: 11/25	Page ____ of ____
Operational Period: 14	Op Period: From: Date: 11/25 Time: 0600 To: Date: Time: 0600		
Unit Name/Designator: Public Information		Unit Leader (Name & Position): Jake Bawles	

TIME

Activity / Events

[illegible]

Prepared by: Lauren OND	Agency Name: Folsom FD	EOC Position: PIO
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Town of Paradise EOC ICS 214

Unit Log

Paradise EOC ICS 214

Incident Name: Camp Fire - Paradise EOC		Date/Time Prepared: 11/26	Page ____ of ____
Operational Period: 17	Op Period: From: Date: 11/26 Time: 0600 To: Date: Time: 0600		
Unit Name/Designator: PUBLIC INFORMATION	Unit Leader (Name & Position): JAKE BAYLESS		

[illegible]

Prepared by: <u>lauren ono</u>	Agency Name: <u>FDISOM FD</u>	EOC Position: <u>PID</u>
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Unit Log

Paradise EOC ICS 214

Incident Name: <u>Camp Fire - Paradise EDC</u>		Date/Time Prepared: <u>11/27</u>	Paradise EOC ICS 214
Operational Period #: <u>17</u>	Op Period Date: <u>11/27</u>	From: <u>0700</u>	To: _____
Unit Name/Designator: _____	Unit Leader (Name & Position): <u>Brandon Vucaro</u>		

TIME

Activity / Events

[illegible]

Prepared By: <u>Lauren Obo</u>	Agency Name: <u>Folsom FD</u>	EOC Position: <u>P/O</u>
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Town of Paradise EOC ICS 214

Unit Log

Paradise EOC ICS 214

Incident Name: Camp Fire - Paradise EOC		Date/Time Prepared: 11/28	Page ____ of ____
Operational Period: 18	Op Period: From: Date: 11/28 Time: 0600 To: Date: Time: 0600		
Unit Name/Designator: Public Information	Unit Leader (Name & Position): Brandon Vaccaro		

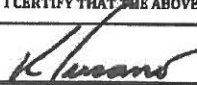
TIME

Activity / Events

[illegible]

Prepared by: <u>Waulen ONO</u>	Agency Name: <u>Folsom Fire Department</u>	EOC Position: <u>PID</u>
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CONTRACT WORK SUMMARY RECORD

Applicant	GPS N	FEMA ID	PW #	CDAAC Disaster #	FEMA Disaster #
Lauren Ono					
Location/Site	GPS W	CDAAC ID	Category	Period Covering	
Town of Paradise EOC in Chico				11/21/2018 to	11/27/2018
Description of Work Performed:					
Public Information Officer for Town of Paradise EOC					
Dates Worked	Contractor	Billing/Invoice Number	Amount	Comments - Scope	
11/21 to 11/21/2018	Lauren Ono		\$ 358.88	9.25 hours	
11/22 to 11/22/2018	Lauren Ono		\$ 660.33	11.5 hours	
11/23 to 11/23/2018	Lauren Ono		\$ 746.46	13 hours	
11/24 to 11/24/2018	Lauren Ono		\$ 717.75	12.5 hours	
11/25 to 11/25/2018	Lauren Ono		\$ 717.75	12.5 hours	
11/26 to 11/26/2018	Lauren Ono		\$ 516.78	12 hours	
11/27 to 11/27/2018	Lauren Ono		\$ 516.78	12 hours	
11/28 to 11/28/2018	Lauren Ono		\$ 210.54	5.5 hours	
to					
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to					
to					
Total This Page			\$ 4,445.27		
Total Other Pages			\$ -		
GRAND TOTAL			\$ 4,445.27		
I CERTIFY THAT THE ABOVE INFORMATION WAS TRANSCRIBED FROM PAYROLL RECORDS, VENDOR INVOICES, OR OTHER DOCUMENTS THAT ARE AVAILABLE FOR AUDIT					
 Certified Ken Cusano		Title Division Chief		Date 2/13/2019	

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Dates Worked	Contractor	Billing/Invoice Number	Amount	Comments - Scope
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